| · · · · · · · · · · · · · · · · · · ·   | CANDIDATE'S REPO  |   |
|---|---|---|
| 1.Qualifying Name and Address of Candidate  Robert J Carter P O Box 27  | 2 Office County (Include 1945 of 1945)  |   |
| Greensburg, LA 70441  | State Representative District 72  | Hope 4403  140  2410  0501574   |
| 3. Date of Primary October 4, 2003  |   |   |
| This report covers from1/1/04   | through12/31/04   |   |
| 4. Type of Report:  |   |   |
| 180th day prior to pranary  | 47/h day after general  |   |
| 90th day prior to primary   | Annual (future election)  |   |
| 30th day prior to primary   | X_Supplemental (past election)  |   |
| 10th day prior to primary   |   |   |
| 10th day prior to general   | Amendment to prior report   |   |
| 5. FINAL REPORT II;   |   |   |
| WrithdrawnFiled aft   | er the election AND all loans and debts paid  |   |
| Unapposed   |   | 28 E  |
| <ol> <li>Name and Address of Financial Institution<br/>(You are required by law to use one or more<br/>banks, sevings and loan associations, or money<br/>market mutual fund as the depository of all<br/>campaign fands.)</li> </ol> | 7. Full Name and Address of Treasurer John N Dyrain 401 E Thomas St Hammond, LA 70401 | ETHES ABMIR<br>CAMPAIGN<br>RECEN<br>2005 FEB 15   |
| Peoples Bank of Louistana<br>P O Box 869<br>Amite, LA 70422   |   | PM 12: 20   |
| 9. Name of Person Preparing Report. John N.D.   | emin  |   |
| Daytime Telephone (988) 345-6262  |   |   |
| 10. WE HEREBY CERTIFY that the information contist rus and correct to the best of our knowledge, in have been made nor contributions received that information required to be reported by the Louisian deliberately omitted.          | formation and ballef, and that no expenditures  | FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY     Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary). |
| Signature of Catendate Chalipperson (16 be signed by Chalipperson only if report by principal committee)  |   |   |
| Skipping of Transurer Form 102, Rev. 1/98, Page Rev. 3/00   |   |   |

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## SUMMARY PAGE

| RECEIPTS  | This Period |
|---|-------------|
| Contributions (Schedule A-1)                    |             |
| 2. In-kind Contributions (Schedule A-2)         |             |
| 3. Campaign paraphernalia sales of \$25 or less |             |
| 4. TOTAL CONTRIBUTIONS (Lines 1 + 2 +3)         |             |
| 5. Other Receipts (Schedule A-3)                |             |
| 6. Loans Received (Schedule B)                  |             |
| 7. Loan Repayments Received (Schedule D)        |             |
| 8. TOTAL RECEIPTS (Lines 4+5+6+7)               |             |

| DISBURSEMENTS                                    | This Period |
|--|-------------|
| 9. Expenditures (Schedule E-1)                   | 100.00      |
| 10. Other Disbursements (Schedule E-2)           |             |
| 11. Loan Repayments Made (Schedule B)            |             |
| 12. Funds Loaned (Schadule D)                    |             |
| 13. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12) | 100.00      |

| FINANCIAL SUMMARY   | Amount  |
|---|---------|
| 14. Funds on hand at beginning of reporting period<br>(Must equal funds on hand at close from last report or -0- if first report for this election) | 1873.22 |
| 15. Plus total receipts this period (Line 8 above)  |         |
| 16. Less total disbursements this period (Line 13 above)  | 100.00  |
| 17. Less in-kind contributions (Line 2 above)   |         |
| 18. Funds on hand at close of reporting period  | 1773.22 |

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| SCHEDULE B: LOANS RECEIVED  |  |  |                               |  |
|---|--|--|-------------------------------|--|
| The following information must be provided for each local Also, complete this schedule for loans received in pase schedule, even if from the same source. Any personal schedule,                              |  |  |                               |  |
| 1. Name and address of lender Robert J Carter P O Box 27 Greensburg, LA 70441   | 2. a. Date*10/24/03 b. Interest rate0.00%(e.p.r.)  c. Amount borrowed* |  |                               |  |
| 3. Endorsers/Guarantors   | 4. Repayments this perio<br>Date                                       |  | Interest                      |  |
| (Enter the full name and address of each person or entity that has endarsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.) | (List payments of principal a<br>list all payments under princi        | nd interest separately. If separa<br>pal.)   | ate amounts are not known,    |  |
| 1. Name and address of lender   | c. Amount borrowed*  d. Belance due *For lines of credit, give li      | b. Interest rate  be date the line of credit wa  nt actually drawn at Item 2ct  t of credit available \$ | . \$s first committed at them |  |
| 3. Endorsers/Guarantors   | Repayments this period     Date  |  | Interest                      |  |
| (Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loss or line of credit. Also, state the amount of liability for each endorser or guarantor.) | (List payments of principal er<br>list all payments under princi       | nd interest separately. If separa<br>pail.)  | ais amounts are not known.    |  |

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## SCHEDULE E-1: EXPENDITURES

Use this schedule to report information on all campaign expenditures for this reporting period. An "expenditure" is any payment made for the purpose of supporting your election to public office and includes monies spent for the campaign's general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-2: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are optional. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page.

| 1. Name and Address of Recipient  2. Expenditures this Reporting Period 9. Date(s)  b. Purpose(s) |                     | Is Reporting Period<br>b. Purpose(s) | c. Amount(s)    |  |
|---|---------------------|--------------------------------------|-----------------|--|
| HDCC  | 5/17/04             | Contribution                         | 100.00          |  |
|   | <del></del>         |                                      |                 |  |
|   |                     |                                      |                 |  |
|   |                     |                                      |                 |  |
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|   |                     |                                      | _               |  |
|   |                     |                                      |                 |  |
| 3. SUBTOTAL (optional)  |                     |                                      | <del>- </del> - |  |
| 4. TOTAL (optional - complete only on last page   | e of this achadule) |                                      | <del></del>     |  |

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